

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | 18) | 75331 | |
| O.I.P.E. CLASSIFIER | 14 | | 9-30-99 |
| FORMALITY REVIEW | LA | 13390 | 10/15/99 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|------|
| Final Original | 18 |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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